

COMBUSTION APPLIANCE SAFETY INSPECTION FORM (CASIF)

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Client: _____ Date: _____

Address: _____ City: _____

Agency: _____ Home Type: ☐-SF, ☐-MF, ☐-M/H

► ☐ **ECIP Furnace Only (No Wx)**—Complete (A)–(D) & attach “Post-Repair/Replacement” Form.

► Forms attached: ☐ **Additional Appliance**, ☐ **Interim Tests**, ☐ **Post-Repair/Replace**

(A) IMMEDIATE SERVICE REQUIRED (Z-1)[CAS Tester Model: _____ ID # _____]

☐ **SERVICE REQUIRED**

Date: _____

☐ **CORRECTED**

Date: _____

Appliance and description of problem	Repairs made • By whom • Date

(B) REQUIRED REPAIRS (Z-2)

Appliance and description of problem	Repairs made • By whom • Date

(C) FINAL TEST RESULTS ↓ (see L-5)

Step F-3(c): Second Living Space Ambient CO: _____ ppm

APPLIANCE	Not Applicable	CO (ppm for each burner/port)	DRAFT	SPILLAGE	COMB. AIR
Main Heater*	NA	_____, _____, _____, _____	– ____iwc / Pa P F NA	Y N NA	IN OUT OK
Other Heater*	NA	_____, _____, _____, _____	– ____iwc / Pa P F NA	Y N NA	IN OUT OK
Gas: Log FP	NA	_____, _____, _____, _____	– ____iwc / Pa P F NA	Y N NA	IN OUT OK
	NA	_____, _____, _____, _____	– ____iwc / Pa P F NA	Y N NA	IN OUT OK
Water Heater*	NA	_____	– ____iwc / Pa P F NA	Y N NA	IN OUT OK
Cook Top	NA	CO ppm: LR_____, RR_____, LF_____, RF_____, Others: _____, _____			
Oven & Broiler	NA	CO ppm: Oven #1_____, Broiler #1_____, Oven #2_____, Broiler #2_____			
Clothes Dryer	NA	CO ppm: _____ Inside living space? Y N Vented outdoors? Y N			
*Mobile Home CAZ Results: <input type="checkbox"/> Space Heater. P F • <input type="checkbox"/> Water Heater. P F • <input type="checkbox"/> Wood Stove/Fireplace: P F					

(D) COMMENTS AND RECOMMENDED REPAIRS

PRE-TEST:	Technician Signature: _____	Date: ____/____/____
POST-TEST:	Technician Signature: _____	Date: ____/____/____

(E) CLIENT INTERVIEW**(All combustion appliances and exhaust devices off prior to Ambient CO tests.)**

E-1 How many people live in your home? # _____ • Do any large pets (dogs) live or sleep indoors? N Y → # _____

E-2 Which appliances burn gas? ☐-Furnace/Heater(s), ☐-W/H, ☐-Cooking, ☐-Dryer, ☐-Gas Log/Lighter, ☐-Gas F/P

E-3 Do you have more than one Furnace/Heater? #: _____ Location(s): _____

E-4 Type of gas: ☐-Natural Gas, ☐-Propane. • Do any appliances burn Oil? N Y → ☐-Furnace, _____

E-5 Have you noticed any gas odors or leaks? N Y → _____

E-6 Have you had have any problems with any gas (oil) appliance? N Y → _____

E-7 Do you use: ☐-Wood, ☐-Pellets, ☐-Coal? N Y → ☐-Stove, ☐-Insert, ☐-Fireplace, _____

E-8 Do you ever use a portable kerosene or gas Heater to warm any part of the house? N Y → **Unvented?** N Y
• If ever used: How long ago was it used? ☐-Earlier today, ☐-Yesterday, ☐-More than a day ago.

E-9 **[Gas Oven]** When was your oven used last? _____ For how long? _____
• Do you ever use your Cooktop or Oven to take the chill off? N Y → _____

E-10 Where is your water Heater located? _____ Do you get enough hot water? Y N

E-11 **[Attached Garage]** Do you park cars in the garage? N Y → # cars _____. Is a car warmed up in the garage? N Y

E-12 **[FAU]** Are any rooms noticeably colder (warmer) than others? N Y → _____

E-13 **[FAU]** Please show me where all registers are located (and which rooms are colder/warmer). [Can check airflow during step F-3.a.]

► **Set conditions for Initial Living Space Ambient CO Test** (WIS Appendix B, Sec. 2.0 & 3.0): • All combustion appliances, air handler & exhaust devices in living space off. • Exterior doors & windows closed. • Interior doors open (except appliance enclosure door). • Interior Cooler Cover in place if present. • Fireplace damper closed if feasible (no fire or hot coals present).

(F) AMBIENT CO MEASUREMENTS (Keep exhaust devices off during Ambient CO tests.)

Record CO Tester readings and calculations in "Pre-Wx Test" column.	Pre-Wx Test	References
F-1 (a) Set Conditions for <u>Initial Living Space Ambient CO Test</u> . (b) Zero CO Tester <u>outdoors</u> ("outdoor" reading). (c) Draw an air sample <u>indoors</u> . (d) Record the <u>difference</u> between "outdoor" and <u>this</u> indoor CO reading (appliances & fans off).	Test Conditions set? Y Outdoor Reading: _____ ppm <u>Initial Living Space</u> Ambient CO: _____ ppm	See WIS Appendix B, Item 2.0.
F-2 Check Furnaces and Space Heaters for gas leaks prior to operating them. [If gas leak is present, STOP! See Z-1.]	Gas leaks? Y N NA U	See Z-3 & WIS Item 7 for gas leaks.
F-3 (a) Operate all Furnaces & Heaters for 5 minutes (with all other combustion appliances and exhaust devices still <u>off</u>), and all doors and windows unchanged. (b) Draw a second air sample from the same <u>indoor</u> location (step F-1c). (c) Record <u>difference</u> between this reading and the "outdoor" reading as the " <u>Second Living Space Ambient CO</u> ".	Furnaces & Space Heaters operating? Y N <u>Second Living Space</u> Ambient CO: _____ ppm [Also record at top of Section (C).]	See WIS Appendix B, Item 3.0.
F-4 Immediately following step F-3 (with all Furnaces/Heaters operating, fans still <u>off</u> , doors/windows unchanged), <u>check for Appliance Ambient CO for each Furnace/Heater</u> : A. [FAU] Check for CO in register nearest the Furnace. B. [Wall, Floor, other non-ducted] Check for CO just above the heat exchanger. (Appendix B, Step 4.3) If CO is more than 2 ppm above Second Living Space Ambient , corrective action is required. (See Z-1 and WIS Item 20)	(Show CO for <u>each</u> Furnace/Heater.) <u>Appliance</u> Ambient CO: _____ ppm, _____ ppm _____ ppm, _____ ppm Is <u>Appliance Ambient CO over 2 ppm higher</u> than <u>Second Living Space Ambient CO</u> ? Y N	See WIS Appendix B, Item 4.0.

► **Set conditions for Appliance Testing (X-4)**: • Follow detailed instruction is **WIS Item 22**. • Check all gas appliances, even if one fails or cannot be completely tested. • Note that "**WIS Item**" references in CASIF are to **WIS Section 3**.

Circle answers in columns to the right: Y = Yes, N = No, NA = Not Applicable, U = Unverifiable. NF = Not Feasible. For Post-Wx Test, recheck all items with answers in "Post-Wx Test" column.	Pre-Wx Test	Post-Wx Test
(G) GAS HOME HEATING SYSTEM—Main Unit <input type="checkbox"/> See Addit'l Unit Form	Location: NA U	<input type="checkbox"/> See Post-R/R Form
G-1 Check for gas leaks (see Z-3). [If leaks, STOP! See Z-1.]	Leaks? (Step F-2) Y N	Y N
G-2 Establish <u>Appliance CAS Test conditions</u> (different from Ambient Test conditions; see X-4 & WIS Item 22).	Conditions set for <u>Appliance</u> tests? Y	Y
G-3 Circle type of Heater (Forced Air Unit = FAU, Wall Furnace = WF, Floor Furnace = FF, Direct Vent = DV, Free Standing = FS.)	Type: FAU WF FF DV FS Other:	
G-4 Does the Heater (and air handler if an FAU) work properly? [If No, see Z-2.] FAU filter must be clean or removed (X-4.6).	Unit works properly? Y N NA U Filter: <input type="checkbox"/> Clean, <input type="checkbox"/> Removed, <input type="checkbox"/> NA	Filter: <input type="checkbox"/> Clean, <input type="checkbox"/> Removed, <input type="checkbox"/> NA

(G) GAS HOME HEATING SYSTEM—Main Unit (cont'd)	Pre-Wx Test	Post-Wx Test
G-5 From where does Furnace/Heater draw combustion air?	Air from: <input type="checkbox"/> Inside, <input type="checkbox"/> Outside	
G-6 Is Space Heater: • "Open" or "Closed" Combustion? • "Natural" or "Induced" Draft?	Combustion: <input type="checkbox"/> Open, <input type="checkbox"/> Closed Draft: <input type="checkbox"/> Natural, <input type="checkbox"/> Induced, <input type="checkbox"/> NA	
G-7 Does Furnace/Heater share a Common Vent? [If Yes, see X-3.] Shares with: <input type="checkbox"/> Water Heater, Other:	Common Vent? Y N U	
G-8 Drill hole for Draft Test (see X-8). If not done, check reason: <input type="checkbox"/> No feasible location, <input type="checkbox"/> Asbestos pipe, <input type="checkbox"/> Double-wall pipe, <input type="checkbox"/> Closed Combustion	Drilling test hole? Y N NA U Induced Draft: <input type="checkbox"/> Not needed for CO	
►CVA: G-9 is same as I-9 for Water Heater, so G-9 is <u>not</u> needed.	G-9 blank—see I-9 → Y N NA	
G-9 Btu/hr <u>input</u> ratings of <u>Open</u> Combustion Furnace and Water Heater in this room or space (see Z-6 for Default Btu): _____ + _____ + _____ = → Calculate minimum CVA requirement (see Y-1). Use the appropriate line (a) – (d) below for Vent Size or Room Volume.	<input type="checkbox"/> CVA is NA (Closed Comb./DV) Total: _____ Btu/hr Input	<input type="checkbox"/> CVA was added, and <i>new total</i> NFVA or Room Volume is shown below. ↓
(a) _____ (# <u>Thousand</u> Btu/hr) ÷ 4 = _____ sq. in. NFVA <i>required for each of 2 vents outdoors</i> (1 Upper & 1 Lower).	(a) <i>Existing</i> vents NFVA Upper: _____ sq. in. Lower: _____ sq. in.	(a) New Total NFVA: Upper: _____ sq. in. Lower: _____ sq. in.
(b) _____ (# <u>Thousand</u> Btu/hr) ÷ 3 = _____ sq. in. NFVA <i>required for 1 vent outdoors</i> (Upper only).	(b) <i>Existing</i> Upper: _____ sq. in. <i>Existing</i> Lower: _____ sq. in.	(b) New Total NFVA: Upper: _____ sq. in.
(c) _____ (# <u>Thousand</u> Btu/hr) x 50 = _____ cu. ft. , the <i>required minimum Room Volume</i> (if inadequate, use (d) below).	(c) <i>Existing</i> Room volume: _____ cu. ft.	(c) New Total Room Volume: _____ cu. ft.
(d) <input type="checkbox"/> Vents installed, <input type="checkbox"/> Solid door replaced by Louvered, <input type="checkbox"/> Solid door removed _____ (# <u>Thousand</u> Btu/hr) ÷ 1 = _____ sq. in. NFVA <i>required for each of 2 vents indoors (min. 100 sq. in. NFVA each).</i>	(d) <i>Existing</i> vents NFVA Upper: _____ sq. in. Lower: _____ sq. in.	(d) New Total NFVA: Upper: _____ sq. in. Lower: _____ sq. in.
• Is CVA OK? • Are any CVA vents obstructed? (See Z-2.)	Is CVA OK? Y N NA	Y N NA
G-10 Is there a large amount of carbon or rust present in the <input type="checkbox"/> Heat Exchanger, <input type="checkbox"/> Draft Hood, <input type="checkbox"/> Flue/Vent Pipe? [If Yes, mark here and describe in (B).]	Large amount of: • Carbon? Y N NA U • Rust? Y N NA U	Y N NA U Y N NA U
G-11 Does visual inspection of Heat Exchanger show any evidence of a crack, metal fatigue, or other defect? [If Yes, see Z-1.]	Heat Exchanger visual defect? Y N NA U	Y N NA U
G-12 <u>FAU only</u> : Are there Return leaks that draw air from an Open Combustion appliance room/enclosure? [If Yes, see Z-2.]	Return leaks? Y N NA U	Y N NA U
G-13 <u>Horizontal</u> FAU: Check model # for NOx Rods (see Z-12).	Nameplate checked? Y N NA U	
G-14 Does Flue/Vent System (see Z-4) show evidence of <i>Immediate Service Required</i> or Required Repairs (Z-1 or Z-2).	(After ceiling insulation, recheck vent pipes Flue/Vent defects? Y N NA U	and CVA vents in attic) Y N NA U
G-15 Are there any other missing/defective items (e.g., appliance door, Combustion Chamber door, Roll-out Shield)? (See Z-2.)	Any other defects? Y N U	Y N U
G-16 To conduct CAS tests, turn on exhaust devices (X-4.3) and commonly-vented appliances (per X-3). • Turn on Furnace or Heater. • Check for Delayed Ignition and Roll-out (see Z-5).	Exhaust devices on? Y NA Delayed Ignition? Y N U Roll-out Ignition? Y N NA U	Y NA Y N U Y N NA U
G-17 Observe burner flame pattern and color. Record Large Yellow flame, Soft Lazy flame, Smothering flame, etc. (see Z-5.1.). • Other:	Large Yellow flame? Y N U Soft Lazy flame? Y N U Other problems? Y N U	Y N U Y N U Y N U
G-18 <u>FAU only</u> : When the blower comes on, is there a change in the flame pattern or color? [If Yes, see Z-5.1.]	Flame interference? Y N NA U	Y N NA U
G-19 Reinstall all access covers removed for inspection.	Covers reinstalled? Y NA	Y NA
G-20 <u>Open Door Tests</u> : After 5 minutes of burner operation, check listed items with room door <u>open</u> . • Run longer and retest if first CO is high. • If Flue Gas CO is NF, write in Appliance <i>Ambient CO</i> instead. <input type="checkbox"/> Can't use Draft Gauge, doing "Smoke Test" (per Y-2.2.), writing in "Smoke" and circling "P" (Pass) or "F" (Fail). • Check for Spillage.→	Outdoor temperature: _____ °F CO: _____, _____, _____, _____ ppm <input type="checkbox"/> Appl. Ambient CO—Flue gas CO is NF Draft: —_____ iwc/Pa P F NA Spillage present? Y N NA	Temp: _____ °F _____, _____, _____, _____ ppm —_____ iwc/Pa P F Y N NA

(G) GAS HOME HEATING SYSTEM—Main Unit (cont'd)	Pre-Wx Test	Post-Wx Test
G-21 <u>Closed Door Tests</u> : If applicable, <u>close</u> door to appliance enclosure or space and repeat tests (see X-7). <input type="checkbox"/> Can't use Draft Gauge , doing "Smoke Test" (per Y-2.2), and writing in "Smoke" and circling "P" (Pass) or "F" (Fail). → • Check for Spillage. →	Door Closed? Y NA CO: _____, _____, _____, _____ ppm <input type="checkbox"/> Appl. Ambient CO—Flue gas CO is NF Draft: —_____ iwc/Pa P F NA Spillage present? Y N NA	NA _____, _____, _____, _____ ppm —_____ iwc/Pa P F Y N NA
G-22 <u>FAU only</u> : If burner turns off and on before room temperature reaches wall thermostat setting, note "Short Cycling". • If air in nearest register exceeds 140°F, record as Required Repair in (B), and recommend FAU not be used until corrected.	Short Cycling? Y N NA <i>If Yes, check temperature inside register nearest the FAU.</i> Yes—Cycles off at: _____°F	Y N NA Off at: _____°F
G-23 If Draft Test hole was drilled: • If Single-wall pipe, seal with "Plug Button" (or Button plus Tape). • If Double-wall, seal with Tap Bolt & High-temp Caulk. (See X-8.4 & WIS Item 23.)	Test hole sealed? Y NA <input type="checkbox"/> Test hole NF & not drilled.	Y NA
G-24 Thermostat set to normal? • [FAU] Clean filter in place?	T'stat & Filter OK? Y N NA	Y N NA
G-25 For each additional gas Furnace/Heater present, repeat steps G-1 to G-24 using CASIF Sec. (G) Additional pages. • If NF to test 2 nd Heater, reason:	Other Heater present? Y N Testing other Heater? Y N NA U	Y N NA U
G-26 <i>If Replacement is proposed, must give reason:</i> <input type="checkbox"/> NOx Rod, <input type="checkbox"/> Other:		

Circle answers in columns to the right: Y = Yes, N = No, NA = Not Applicable, U = Unverifiable. NF = Not Feasible. For Post-Wx Test, recheck all items with answers in "Post-Wx Test" column.		
(H) GAS LOG/LIGHTER & GAS FIREPLACE UNIT	Pre-Wx Test	Post-Wx Test
H-1 <input type="checkbox"/> Gas Log, <input type="checkbox"/> Gas-Fired Log Lighter, <input type="checkbox"/> Gas Fireplace Unit • Check for gas leaks (see Z-3). • Test Conditions set? (X-4)	Gas leaks? Y N [If leaks, STOP! See Z-1.]	Y N
H-2a <u>Gas Log</u> <input type="checkbox"/> Is present, <input type="checkbox"/> Is <u>Primary</u> Heater <input type="checkbox"/> NA • If Primary, is damper functional & blocked open adequately? • <i>Not</i> Primary but unblocked, occupants educated? (WIS Item 30)	<u>Primary</u> Heater? Y N NA Damper OK? Y N NA Occupants educated? Y N NA	Y N NA Y N NA Y N NA
H-2b <u>Gas Log</u> CO & Draft checks (X-9.1. & WIS Item 30). Heat ceramic logs 10 minutes; run longer and retest if first CO is high. • Perform "Smoke Test" along fireplace opening:	Gas Log: CO _____ ppm P F NA Visual Draft Test: P F NA	_____ ppm P F Draft P F
H-3 <u>Open Comb.</u> <input type="checkbox"/> Gas Fireplace, <input type="checkbox"/> Gas F/P Insert <input type="checkbox"/> NA After 5 minutes operation, check CO (X-9.1. & WIS Item 31). • If Flue Gas CO is NF, measure Appliance <i>Ambient</i> CO. • Perform "Smoke Test" along top of dilution air intake opening	<u>Open Comb.</u> Gas F/P or Insert: <input type="checkbox"/> Appl. Ambient CO—Flue gas CO is NF CO _____ ppm P F NA Visual Draft Test: P F NA U	<input type="checkbox"/> Appl. <u>Ambient</u> CO _____ ppm P F Draft P F
H-4 <u>Closed Comb.</u> <input type="checkbox"/> Gas Fireplace, <input type="checkbox"/> Gas F/P Insert <input type="checkbox"/> NA After 5 minutes operation, check CO (X-9.1. & WIS Item 31). • If Flue Gas CO is NF, measure Appliance <i>Ambient</i> CO.	<u>Closed Comb.</u> Gas F/P or Insert: <input type="checkbox"/> Appl. Ambient CO—Flue gas CO is NF CO _____ ppm P F NA	<input type="checkbox"/> Appl. <u>Ambient</u> CO _____ ppm P F

Circle answers in columns to the right: Y = Yes, N = No, NA = Not Applicable, U = Unverifiable. NF = Not Feasible. For Post-Wx Test, recheck all items with answers in "Post-Wx Test" column.		
(I) GAS WATER HEATER—Main Unit	Pre-Wx Test	Post-Wx Test
I-1 Check for gas leaks (see Z-3). [If leaks, STOP! See Z-1.]	Gas leaks? Y N	Y N
I-2 Establish Appliance CAS Test conditions (different from Ambient Test conditions; see X-4 & WIS Item 22).	Conditions set for Appliance tests? Y	Y
I-3 From where does Water Heater draw combustion air?	Air from: <input type="checkbox"/> Inside, <input type="checkbox"/> Outside	
I-4 Is Water Heater: • "Open" or "Closed" Combustion? • "Natural" or "Induced" Draft?	Combustion: <input type="checkbox"/> Open, <input type="checkbox"/> Closed Draft: <input type="checkbox"/> Natural, <input type="checkbox"/> Induced, <input type="checkbox"/> NA	
I-5 Does Water Heater share a Common Vent? [If Yes, see X-3.] Shares with: <input type="checkbox"/> Furnace, Other:	Common Vent? Y N U	
I-6 Is Outer and/or Inner Combustion Chamber <u>cover</u> missing?	Missing: <input type="checkbox"/> Inner, <input type="checkbox"/> Outer, <input type="checkbox"/> All OK	<input type="checkbox"/> Inner, <input type="checkbox"/> Outer, <input type="checkbox"/> OK
I-7 <u>Mobile Home</u> : Is floor sturdy & holding tank in a safe position?	Floor sturdy & safe? Y N NA	Y N NA

(I) GAS WATER HEATER—Main Unit (cont'd)	Pre-Wx Test	Post-Wx Test
I-8 Drill hole for Draft Test (see X-8). If not done, check reason: <input type="checkbox"/> No feasible location, <input type="checkbox"/> Asbestos pipe, <input type="checkbox"/> Double-wall pipe, <input type="checkbox"/> Closed Combustion	Drilling test hole? Y N NA Induced Draft: <input type="checkbox"/> Not needed for CO	
►CVA: I-9 is same as G-9 for Furnace, so I-9 is not needed.	I-9 blank—see G-9 → Y N NA	
I-9 Btu/hr <u>Input</u> ratings of <u>Open</u> Combustion Water Heater and Furnace in this room or space (see Z-6 for Default Btu): _____ + _____ + _____ = → Calculate minimum CVA requirement (see Y-1). Use the appropriate line (a) – (d) below for Vent Size or Room Volume.	<input type="checkbox"/> CVA is NA (Closed Comb./DV) Total: _____ Btu/hr Input	<input type="checkbox"/> CVA was added, and <i>new total</i> NFVA or Room Volume is shown below. ↓
(a) _____ (# <u>Thousand</u> Btu/hr) ÷ 4 = _____ sq. in. NFVA required for each of 2 vents outdoors (1 Upper & 1 Lower).	(a) <i>Existing</i> vents NFVA Upper: _____ sq. in. Lower: _____ sq. in.	(a) New Total NFVA: Upper: _____ sq. in. Lower: _____ sq. in.
(b) _____ (# <u>Thousand</u> Btu/hr) ÷ 3 = _____ sq. in. NFVA required for 1 vent outdoors (Upper only).	(b) <i>Existing</i> Upper: _____ sq. in. <i>Existing</i> Lower: _____ sq. in.	(b) New Total NFVA: Upper: _____ sq. in.
(c) _____ (# <u>Thousand</u> Btu/hr) x 50 = _____ cu. ft. , the required minimum Room Volume (if inadequate, use (d) below).	(c) <i>Existing</i> Room volume: _____ cu. ft.	(c) New Total Room Volume: _____ cu. ft.
(d) <input type="checkbox"/> Vents installed, <input type="checkbox"/> Solid door replaced by Louvered, <input type="checkbox"/> Solid door removed _____ (# <u>Thousand</u> Btu/hr) ÷ 1 = _____ sq. in. NFVA required for each of 2 vents indoors (min. 100 sq. in. NFVA each).	(d) <i>Existing</i> vents NFVA Upper: _____ sq. in. Lower: _____ sq. in.	(d) New Total NFVA: Upper: _____ sq. in. Lower: _____ sq. in.
• Is CVA OK? • Are any CVA vents obstructed? (See Z-2.)	Is CVA OK? Y N NA	Y N NA
I-10 Is there a large amount of carbon or rust present in the <input type="checkbox"/> Combustion Chamber, <input type="checkbox"/> Draft Hood, <input type="checkbox"/> Flue or Vent Pipe? [If Yes, mark here and describe in (B).]	Large amount of: • Carbon? Y N NA U • Rust? Y N NA U	Y N NA U Y N NA U
I-11 Does Flue/Vent System (see Z-4) show evidence of <i>Immediate Service Required</i> or Required Repairs (see Z-1 or Z-2).	(After ceiling insulation, recheck vent pipes and CVA vents in attic) Flue/Vent defects? Y N NA U	Y N NA U
I-12 Conduct CAS tests. (Turn on exhaust devices on (X-4) and commonly-vented appliances (X-3). • Mark T-stat and turn it up to turn on burner.) • Look for Delayed Ignition and Roll-out (see Z-5).	Exhaust devices on? Y NA Delayed Ignition? Y N U Roll-out Ignition? Y N NA U	Y NA Y N U Y N NA U
I-13 Observe burner flame pattern and color. Record Large Yellow flame, Soft Lazy flame, Smothering flame, etc. (see Z-5.1). • Other:	Large yellow flame? Y N U Soft lazy flame? Y N U Other problems? Y N U	Y N U Y N U Y N U
I-14 Reinstall all access covers removed for inspection.	Covers reinstalled? Y NA	Y NA
I-15 <u>Open Door Tests</u> : After 5 minutes of burner operation, check listed items with room door <u>open</u> . • Run longer and retest if first CO is high. • If Flue Gas CO is NF, write in Appliance <i>Ambient</i> CO instead.] <input type="checkbox"/> Can't use Draft Gauge, doing "Smoke Test" (per Y-2.2), writing in "Smoke" and circling "P" (Pass) or "F" (Fail). • Check for Spillage.→	Outdoor temperature: _____ °F CO: _____, _____ ppm <input type="checkbox"/> Appl. Ambient CO—Flue gas CO is NF Draft: —_____ iwc/Pa P F NA Spillage present? Y N NA	Temp: _____ °F _____, _____ ppm _____, _____ ppm Y N NA
I-16 <u>Closed Door Tests</u> : If applicable, <u>close</u> door to appliance enclosure or space and repeat tests (see X-7). <input type="checkbox"/> Can't use Draft Gauge, doing "Smoke Test" (per Y-2.2), and writing in "Smoke" and circling "P" (Pass) or "F" (Fail). → • Check for Spillage. →	Door Closed? Y NA CO: _____, _____ ppm <input type="checkbox"/> Appl. Ambient CO—Flue gas CO is NF Draft: —_____ iwc/Pa P F NA Spillage present? Y N NA	NA _____, _____ ppm _____, _____ ppm Y N NA
I-17 If Draft Test hole was drilled: • If Single-wall pipe, seal with "Plug Button" (or Button plus Tape). • If Double-wall, seal with Tap Bolt & High-temp Caulk. (See X-8.4 & WIS Item 23.)	Test hole sealed? Y NA <input type="checkbox"/> Test hole NF & not drilled.	Y NA
I-18 Return Thermostat to original setting.	Thermostat reset? Y N NA	Y N NA
I-19 If there is a 2nd gas Water Heater present, repeat steps I-1 to I-18 using CASIF Sec. (I) Additional pages. • If NF to test 2 nd Water Heater, reason:	Other Wtr Htr present? Y N Testing other Wtr Htr? Y N NA U	Y N NA U
I-20 If Replacement is proposed, must give reason: <input type="checkbox"/> Leaking, <input type="checkbox"/> Other:		

Circle answers in columns to the right: Y = Yes, N = No, NA = Not Applicable, U = Unverifiable.
 NF = Not Feasible. For Post-Wx Test, recheck all items with answers in "Post-Wx Test" column.

(J) GAS COOK STOVE & OVEN/BROILER		Pre-Wx Test	Post-Wx Test
		NA	<input type="checkbox"/> See Post-R/R Form
J-1	Check for gas leaks (see Z-3). [If leaks, STOP! See Z-1.]	Gas leaks? Y N	Y N
J-2	Is there a kitchen exhaust vent to outdoors?	Exhausts outdoors? Y N	
J-3	<u>Exhausts Outdoors</u> : Is there a fan in the exhaust vent? • Does fan work satisfactorily? • <u>Mobile Homes</u> : See WIS Item 35 for exhaust requirement.	Fan present? Y N NA Fan works OK? Y N NA M/H exhaust OK? Y N NA	Y N NA Y N NA Y N NA
J-4	• <u>Cooktop</u> : With grates in place, light first burner on High for test. After 15-seconds, check CO with probe held horizontally approx. 12" above the flame (see X-9.2). • Test, turn off, light next burner and repeat. • If CO is high, clean grate or burn longer. • <u>Griddle</u> : Burn Griddle on high at least 5 minutes and test. →	Exhaust fans on? Y NA LR _____, RR _____ ppm CO LF _____, RF _____ ppm CO 5 th Burner _____ ppm CO NA Griddle: _____ ppm CO NA	Y NA _____, _____ _____, _____ _____ Griddle: _____
J-5	<u>Oven & Broiler</u> : Operate burners at least 5 minutes & sample CO in exhaust stream (see X-9.2.). ► If 1 st CO reading is high, look for dirty Oven & covered vent holes, and run 15-30 minutes longer & retest. • <u>Single-Burner Oven</u> : Operate on highest Bake setting or on "Broil". Record CO ppm on "Oven #1" line. • <u>Two-Burner Oven</u> (with Broiler burner at top of Oven): (a) Run on highest Bake setting; record on "Oven #1" line. (b) Turn to "Broil", wait 1 minute, recheck CO, put on "Broiler #1" line. • <u>Broiler separate from Oven</u> : Operate on "Broil" 5 to 30 minutes and check CO. Record on "Broiler" line. • <u>Convection Oven</u> : Check CO in Convection mode (fan on) and then in standard mode (fan off), and record the <u>higher</u> reading.	Vented outdoors? Y N (X-9.2.c) Is Oven/Broiler dirty? Y N Are vent holes in bottom covered by foil? Y N NA Oven #1: _____ ppm CO Broiler #1: _____ ppm CO Oven #2: _____ ppm CO Broiler #2: _____ ppm CO	Y N Y N Y N NA _____ ppm CO _____ ppm CO _____ ppm CO _____ ppm CO
J-6	If Replacement is proposed, must give reason:		

Circle answers in columns to the right: Y = Yes, N = No, NA = Not Applicable, U = Unverifiable.
 NF = Not Feasible. For Post-Wx Test, recheck all items with answers in "Post-Wx Test" column.

(K) GAS CLOTHES DRYER		Pre-Wx Test	Post-Wx Test
		NA	
K-1	Check for gas leaks (see Z-3). [If leaks, STOP! See Z-1.]	Gas leaks? Y N	Y N
K-2	Is Dryer located <i>inside</i> the Living Space? (WIS Items 17 & 34) • If No, in <input type="checkbox"/> Attached Garage, <input type="checkbox"/> Other:	Inside Living Space?: Y N	
K-3	Is exhaust to outdoors needed (infiltration measures will be installed)? • Is the dryer properly exhausted to outdoors? • Does Moisture Exhaust terminate <i>underneath</i> the home?	Needs outdoor exhaust? Y N Exhausted outdoors? Y N Terminates under home? Y N	Y N Y N Y N
K-4	Does Moisture Exhaust have leaks, obstructions, improper termination, etc. that must be corrected before infiltration reduction measures are installed? [Record in CASIF (B)]	Repairs required? Y N NA	Y N NA
K-5	With exhaust devices on and lint filter clean, operate Dryer for 30 seconds on high heat setting. (WIS Item 29) • With room door <u>open</u> , check CO in Moisture Exhaust termination (or inside top-mount lint-screen cavity). If drum is not empty and CO is high, empty it and retest.	Filter clean? Y NA (Door <u>Open</u>) CO: _____ ppm	Y NA _____ ppm CO
K-6	If applicable, close door to the room where Dryer is located and again check CO.	(Door <u>Closed</u>) NA CO: _____ ppm	NA _____ ppm CO

(L) WRAP-UP PROCEDURE		Pre-Wx Test	Post-Wx Test
L-1	Turn off exhaust devices operated for tests.	Exhaust devices off? Y NA	Y NA
L-2	Reset thermostats to normal. [FAU] Clean filter in place?	T'stats & Filter OK? Y	Y
L-3	Make sure all appliance access panels are in place.	Panels in place? Y	Y
L-4	Seal Draft/CO test holes (See X-8.4. & WIS Item 23.)	Test hole(s) sealed? Y NA	Y NA
L-5	Transfer <u>Final</u> test results to Section (C) on page 1. (Transfer Post-Wx data. • When Post-Wx Tests <u>not</u> performed, transfer <i>Pre-Wx Test</i> data. • When both <i>Open</i> and <i>Closed</i> Door tests are performed, transfer "worst case" readings.)		Data transferred to page 1? Y

(M) COMBUSTION APPLIANCE ZONE (CAZ) TEST—DATA FORM

(Use only when CAZ Testing is required)

(1) General Instructions: (Using WIS Appendix C, Parts 5.0 to 9.0, check each appliance for which CAZ Testing is required.)

- Measure "Baseline Pressure", per Part (2) below.
- "Smoke" doors (per Appendix C, Part 3.0), and perform **CAZ Pressure measurement**. Follow procedure for the Gauge being used (per Appendix C, Parts 6.0 – 8.0).
- For each Test Condition, determine the "CAZ Pressure", and record it in the "CAZ Pressure" column below. Circle "–" if Negative pressure, or "+" if Positive.
- Identify and evaluate the "Worst Case" Test Condition, per Part (3) below.

(2) Baseline Pressure:

- Follow instructions for the Gauge being used (Appendix C, Parts 6.0 – 8.0).
- Measure "Baseline Pressure", record it in box to the right, and circle "–" or "+".

BASELINE PRESSURE:

_____ Pa – +

(Use automatic Baseline adjustment on DG-700.)

TEST CONDITIONS	CAZ PRESSURE	WORST CASE
► Test Condition "A"—Fans Only • Only Exhaust Fans/Devices <u>On</u> (FAU Air Handler <u>Off</u>)	_____ Pa – +	<input type="checkbox"/>
► Test Condition "B"—Fans & Air Handler • Exhaust Fans/Devices <u>and</u> FAU Air Handler <u>On</u>	_____ Pa – +	<input type="checkbox"/>
► Test Condition "C"—Air Handler Only • Only FAU Air Handler <u>On</u> (Exhaust Fans/Devices <u>Off</u>)	_____ Pa – +	<input type="checkbox"/>

(3) Evaluate "Worst Case" Condition:

- The "Worst Case" condition is the Test Condition that causes the *greatest negative* "CAZ Pressure".
- Mark the box ☒ for that condition in the "Worst Case" column above.
- Compare the "Worst Case" CAZ Pressure with the HDL for the appliance being evaluated in the HDL Tables below.
 - If "Worst Case" CAZ Pressure is positive or *not more negative* than the HDL, it is a "Pass".
 - If "Worst Case" CAZ Pressure is *more negative* than the HDL, it is a "Fail", and corrective action is required before Shell Sealing measures are installed (see Appendix C, Part 9.0).

Appl. & Location: _____

CAZ "Worst Case" = – _____ Pa • Max. HDL = – _____ Pa • ☐ Pass ☐ Fail**HDL TABLE FOR: SOLID FUEL APPLIANCES¹**MARK ☒ THE CATEGORY BEING TESTED ↓**HDL (MAX. DEPRESS.)**

Standard Fireplace ² (unlined chimney on exterior wall)	<input type="checkbox"/>	–3 Pa
Standard Fireplace ² (metal lined, insulated, or interior chimney)	<input type="checkbox"/>	–4 Pa
Standard Wood Stove or Fireplace Insert (not EPA-Certified & "Airtight")	<input type="checkbox"/>	–3 Pa
Controlled-Combustion EPA-Certified Wood Stove or Fireplace Insert drawing combustion air from living space	<input type="checkbox"/>	–5 Pa
Controlled-Combustion EPA-Certified Wood Stove or Fireplace Insert drawing combustion air from outdoors	<input type="checkbox"/>	–10 Pa

HDL TABLE FOR: GAS- AND OIL-FIRED APPLIANCES¹MARK ☒ THE CATEGORY BEING TESTED ↓**HDL (MAX. DEPRESS.)**

Natural Draft Water Heater only	<input type="checkbox"/>	–2 Pa
Natural Draft Water Heater and Natural Draft Furnace/Boiler (common vent)	<input type="checkbox"/>	–3 Pa
Natural Draft Water Heater and Induced Draft Furnace/Boiler (common vent)	<input type="checkbox"/>	–5 Pa
Natural Draft Furnace/boiler only	<input type="checkbox"/>	–5 Pa
Induced Draft Furnace/Boiler only	<input type="checkbox"/>	–15 Pa

¹ HDL = House Depressurization Limit, the maximum allowable Depressurization in the CAZ.² Open Combustion Fireplace *without* sealed glass doors and restricted air intake.